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CONFIRMATION NO. 3444

SERIAL NUMBER 10/612,679	FILING OR 371(c) DATE 07/01/2003 RULE	CLASS 424	GROUP ART UNIT 1615	ATTORNEY DOCKET NO. 23190A	
APPLICANTS Daniel S. Gierer, East Lyme, CT; ** CONTINUING DATA ***** This appln claims benefit of 60/395,090 07/10/2002 S T ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/26/2003					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>SS</u> Examiner's Signature Initials		STATE OR COUNTRY CT	SHEETS DRAWING 0	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 3
ADDRESS 28523					
TITLE Pharmaceutical composition having uniform drug distribution and potency					
FILING FEE RECEIVED 1160	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		